## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 CLAIMS AS FILED - PART I

Application or Docket Number 10/66/252

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                                     |                                   |                     |                  |          |                    | SMALL ENTITY TYPE      |                |                     | HER THAN<br>ALL ENTITY |  |
|---|--|---|-------------------------------------|-----------------------------------|---------------------|------------------|----------|--------------------|------------------------|----------------|---------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | 24                                  |                                   |                     |                  |          | RATE               | FEE                    | OR<br><b>1</b> | RATE                | FEE                    |  |
| FOR   |  |   | NUMBER FILED                        |                                   | NUMB                | ER EXTRA         |          | Basic Fee          | 375.00                 | OR             | BASIC FEE           |                        |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 2 iminus 20= *                      |                                   | * /                 | • 4              |          | X\$ 9=             | •                      | OR             | X\$18=              | 747                    |  |
| INDEPENDENT CLAIMS  |  |   | minus 3 = *                         |                                   |                     |                  |          | X42=               |                        | OR             | X84=                | 420                    |  |
| MULTIPLE DEPENDENT CLAIM PRESE  |  |   |                                     |                                   |                     |                  |          |                    |                        |                | -                   | 420                    |  |
| * H   | the difference                                 | less than ze  | ss than zero, enter "0" in column 2 |                                   |                     | ı                | +140=    |                    | OR                     | +280=          | 10                  |                        |  |
|   |  |   | MENDED - PART II                    |                                   |                     |                  |          | TOTAL              |                        | OR             | OTHER               | 1249                   |  |
|   |  | (Column 1)  | (Column 2) (Column 3                |                                   |                     |                  |          | SMALL              | ENTITY                 | OR             | SMALL               |                        |  |
| <b>AMENDMENT A</b>  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                                     | HIGHI<br>NUMI<br>PREVIO<br>PAID I | BER                 | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | • 18  | Minus                               | * d                               | W                   | =                |          | X\$ 9=             |                        | OR             | X\$18=              | /                      |  |
|   | Independent                                    | * /<br>NTATION OF MI  | Minus                               | L                                 | 8                   | - /              |          | X42=               |                        | OR             | X84=                |                        |  |
|   | FINST PRESE                                    | NIATION OF ME   | JUIPLE DEI                          | PENDENT                           | CLAIM               |                  |          | +140=              |                        | OR             | +280=               |                        |  |
|   |  |   |                                     |                                   |                     |                  | L        | TOTAL              |                        | OR             | TOTAL               | /                      |  |
| (Column 1) (Column 2) (Column 3)  |  |   |                                     |                                   |                     |                  |          |                    |                        |                | ADDIT, FEET         | /                      |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                                     | HIGHI<br>NUME<br>PREVIO<br>PAID I | BER                 | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total ·  | •   | Minus                               | **                                |                     | =                |          | X\$ 9=             |                        | OR             | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus                               | ***                               |                     | =                |          | X42=               |                        | OR             | X84=                |                        |  |
|   | FIRST PRESE                                    | NTATION OF ML   | ILI IPLE DEF                        | ENDENT                            | CLAIM               |                  |          | +140=              |                        | OR             | +280=               |                        |  |
|   |  |   |                                     |                                   |                     |                  | _<br>_   | TOTAL<br>DDIT, FEE |                        | OR             | TOTAL<br>ADDIT, FEE |                        |  |
|   |  | (Column 1)  |                                     | (Colum                            |                     | (Column 3)       |          |                    |                        | •              | ODII. I ELE         |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                                     | HIGHE<br>NUME<br>PREVIO<br>PAID F | EST<br>BER<br>BUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus                               | **                                |                     | =                |          | X\$ 9=             |                        | OR             | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus                               | ***                               | 01.533              | =                | F        | X42=               |                        | OR             | X84=                |                        |  |
| L!  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                     |                                   |                     |                  | <b> </b> |                    |                        |                |                     |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** OR |  |   |                                     |                                   |                     |                  |          |                    |                        | +280=          |                     |                        |  |
|   | i the "Highest Nu                              | mber Previously Pa<br>mber Previously Pa<br>ber Previously Pali | id For IN THI                       | S SPACE in                        | less that           | 3 enter *3 *     | ~        | DOIT. FEE          |                        |                | ODIT. FEE           |                        |  |